

Interim Payment Contingency Plan - Podcast #2

Thank you for your interest in the HP Medicaid Management Information System (MMIS) conversion. As you are aware, the Georgia Department of Community Health (DCH) is working to implement a new MMIS. Until the MMIS goes live on November 1, 2010, DCH will update you via a series of podcasts on the project's progress. **Please click on the MMIS Podcast Update icon to the right to listen** to the podcast, or feel free to read the message below.



Welcome to the second in a series of podcasts for our stakeholder community on the Medicaid Management Information System, or MMIS implementation. Hi, I'm Jerry Dubberly, Chief of the Medicaid Division at the Georgia Department of Community Health. Today, I'm going to speak about the Department's Interim Payment Plan (IPP) that was developed in preparation for the new MMIS implementation.

As you are probably aware, on November 1st, 2010, DCH will implement a new MMIS. As the largest purchaser of health care in the state of Georgia, DCH knows the importance of payment continuity to our health care providers and access to services for our members.

Current MMIS testing has *not* identified a large-scale system issue that would require the implementation of an Interim Payment Plan (IPP). DCH has taken proactive steps to ensure our ability to pay providers if there are any system issues during the transition by creating the Interim Payment Plan Contingency Guide. The Contingency Guide includes indicators that will be monitored; reporting sources; thresholds for interim payment activation; process for interim payment requests; tracking and reporting of payments; and provider communication. Here is an overview of the Interim Payment Plan Contingency Guide. Please also take the time to read the plan in full.

- **Indicator Monitoring.** DCH will monitor indicators both pre and post go-live to identify any defects or issues that may warranting the issue of interim payments. These indicators include but are not limited to:
 - Any known issues by claim type or category of services prior to go-live;
 - Constraints by claim submission medium such as web, trading partner, etc.;
 - Call center inquiries;
 - Increased volume of paper claims;
 - Claim denial/rejection percentages;
 - Increased return to provider notices;
 - Suspended claims volumes; and
 - Appeals for claim payment related reasons.
- **Reporting Sources.** DCH will have a number of reports and reporting tools available to provide an indication of any potential payment issues. These include reports on daily claims processing metrics; suspense volumes by exception code; web transaction reports; crossover claim reports; and call center volumes and call types, just to name a few.
- **Thresholds for Interim Payment Plan Activation.** DCH has set thresholds to identify at what point and at what level the Interim Payment Plan should be activated – whether it is by category of service, individual provider, claim types, etc.. The thresholds are intended to be guides, and may need to be re-evaluated by DCH depending upon the individual business situation.

- **Process for Interim Payments.** If Interim Payment Plan must be activated, providers will be required to follow process that is fully outlined in the Interim Payment Plan Contingency Guide. DCH will track all interim payment requests and interim payments made to providers. Claims subject to interim payments will be reconciled with those made to the provider. This activity will occur once the responsible system defect is corrected.

Because federal matching dollars are only available if the interim payment issued is based upon actual claims, DCH will make every effort to facilitate the claims being adjudicated through the MMIS *prior* to making an interim payment.

- **Communication.** Decisions about Interim Payments will be communicated at the appropriate level of plan activation. If interim payments are to be made at a category of service level, providers will be notified through banner messages and notices posted to the web portal. DCH will also communicate plan activation to relevant provider associations. If the plan activation is provider-specific or limited to a certain defect affecting only certain providers, the individual providers will receive notification.

This process will *only* be used **AFTER** the MMIS go-live *and* in the event that valid claims or EDI submissions cannot be processed in a reasonable time period. DCH encourages provider feedback on this plan. The full Interim Payment Plan Contingency Guide is available on the MMIS Georgia Provider Readiness Portal, which can be accessed through the DCH webpage www.dch.ga.gov, under the “related links” section.

